

Discharge Summary

Dept. of CARDIOLOGY

PatientDetails

UHID	ARH1.0001229603	Name	Mrs. D YELLAVVA
Patient Identifier	ARHIP55295	Age	50Yr 0Mth 1Days
Sex	Female	Date of Admission	04-Apr-2022
Date of Discharge	05-Apr-2022	Address	.,Sircilla,Telangana
Ward/Bed No	First Floor, Day Care, Bed no:DC 1	Primary Consultant	Dr. Vidya Sagar A CARDIOLOGY
Surgeons	Dr. Vidya Sagar A CARDIOLOGY		

Diagnosis

Diagnosis	CORANARY ARTERY DISEASE, NON ST ELEVATED MYOCARDIAL INFRACTION,SR SEVER LV SYSTOLIC DYSFUNCTION (EF:30%) R/F:HYPERTENSION CORONARY ANGIOGRAM DONE ON(05/04/2022) CAD-TVD(LAD,LCX,RCA) PLAN:CABG
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Surgery / Procedures Done

Surgery / Procedure

Surgery / Procedure Name	Date
CORONARY ANGIOGRAM	05-Apr-2022

Details

Chief complaint(s)	C/o chest pain since 1day. ON ADMISSION VITAL ----- Patient conscious, coherent
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Afebrile
 PR-82min
 BP-110/70mmhg
 RR-21/min
 RS-BAE+,
 CVS-S1S2+
 P/A-Soft, BS+
 SPO2-98%

History of Past/Personal/Family

K/C/O HYPERTENSION, Onregular medication

History of Present Illness

patient was asymptomatic on day ago then developed chest pain ,which is sudden onset non radiating

Investigations Done**Investigations Done****BioChemistry****POTASSIUM - SERUM / PLASMA**

05-Apr-2022 03:02 AM

POTASSIUM - SERUM / PLASMA	4.2 mmol/L	Healthy Adults: 3.5 - 5.1
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Treatment Summary**Discussion**

A 55years old female patient Mrs. D.YELLAVVA presented to hospital with C/o chest pain since 1day.H/o patient was asymptomatic on day ago then developed chest pain, which is sudden onset non radiating.All necessary investigations were done and diagnosed as CORONARY ARTERY DISEASE, NON-ST-ELEVATION MYOCARDIAL INFARCTION,SR, SEVERE LV SYSTOLIC DYSFUNCTION, EF-30%.R/ F HYPERTENSION, CORONARY ANGIOGRAM DONE ON 5.4.2022 CAD- TVD (LAD, LCX, RCA) .PLAN: CABG. CTVS surgeon consultation taken planed for surgery CABG. Patient was treated with Antiplatelet, Anticoagulants, Antacids and other supportive measures. Patient is symptomatically Now patient is being discharged in hemodynamically stable condition with required medication and advice.

DISCHARGE MEDICATION:

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- 1) TAB.ECOSPRIN 150MG ONCE DAILY AT 2PM TO CONTINUE.
 - 2) TAB.CLOPILET 75MG ONCE DAILY AT 2PM TO CONTINUE.

3) TAB.AZTOR 40MG ONCE DAILY AT 9PM TO CONTINUE.

REVIEW AFTER 11 DAYS TO CARDIOLOGY OPD.

Discharge Examination

Vitals stable	Yes
Surgical wound clean	Not applicable
Blood sugar levels controlled	Not applicable
Pain score below 4	Yes
Ambulatory	Yes
Condition on discharge	Stable

DAMA/DOR/LAMA

None

Special Instructions

Diet	As per Dietician's advise
Emergency Care	<p>** IN CASE YOU HAVE</p> <ul style="list-style-type: none">-FEVER (101 F)-NEW ONSET PAIN OR WORSENING OF EXISTING PAIN-VOMITINGS-DIFFICULTY IN BREATHING-ALTERED LEVEL OF CONSCIOUSNESS-DISCHARGE / BLEEDING FROM OPERATED WOUND SITE-WORSENING OF ANY OF YOUR SYMPTOMS-ANY OTHER SIGNIFICANT COMPLAINTS <p>---> IN CASE YOU DO NOT UNDERSTAND YOUR DISCHARGE MEDICATIONS AND / OR NOTICE ANY NEW REACTION TO YOUR MEDICATIONS, PLEASE CALL 9963145554.</p> <p>---> FOR YOUR APPOINTMENTS, SCHEDULED OR OTHERWISE, PLEASE REACH OUT TO OUR CALL CENTER AT- 0878-22000</p>

Review Details

**Review
Consultant**

Dr. Vidya Sagar A--CARDIOLOGY

**JrConsultant /
Registrar /
Resident**

Dr. Vidya Sagar A
CARDIOLOGY
Primary Consultant

Please understand your discharge prescription from your doctor before using the medicines.

You can contact Emergency Room Physician, APOLLO HOSPITALS at or .